類: ·	
Thomas Jensen 33/5299 Name and Prisoner/Booking Number	JUL 2 4 %012
Place of Confinement	CLERK
307 Saint Joseph ST Mailing Address	
RapidCity S.D 5770/ City/State, Zip Code	
<u> </u>	DISTRICT COURT SOUTH DAKOTA DIVISION
Thomas Jackie Jensen (Full Name of Plaintiff)	, Case No. <u>12 - 5052</u>
Plaintiff, U.S. Department of Justice	CIVIL RIGHTS COMPLAINT BY A PRISONER
Richard W. Schott	,
(Full Name of Each Defendant)	
Defendants.	
A. JURI	SDICTION
<ol> <li>This Court has jurisdiction over this action pa. □ 28 U.S.C. § 1343(a)(3); 42 U.S.C. § 15.</li> <li>b. ☑ 28 U.S.C. § 1331; Bivens v. Six Unknown.</li> <li>c. □ Other: (Please specify.)</li> </ol>	
2. Name of Plaintiff: Thomas Textsen Present mailing address: Pennington local (Failure to notify the Court of any	Y Tail 30757 Toseph ST Rapid City 60 5720/ change of address may result in dismissal of this action.)
	B. D. P P.O. Bax 474701 Des Moines IA 50947
<u> </u>	The second secon

3.	Name of first Defendant: U.S Opt of Justice. The first Defendant is employed as: Judicial US Covernest at Washington DC
	(Position and Title) (Institution)
	This Defendant is sued in his/her: ☐ individual capacity ☐ official capacity (check one or both)
	Explain how this Defendant was acting under color of law: They cice the
	Head office of the foison institutions
4.	Name of second Defendant: Federal Bureau  Name of second Defendant is employed as:  LOCK BOX Officer at F.B.OP ROBOX 474701 Des Mones FA SO947-006  (Position and Title)  (Institution)
	This Defendant is sued in his/her: $\square$ individual capacity $\square$ official capacity (check one or both)
	Explain how this Defendant was acting under color of law: They are the capacity
	Who gathers and a)stributs monies from Federal prisoners.
5.	Name of third Defendant: Aichard W, Schott. The third Defendant is employed as:  Regional Counsel at FBOP 400 State Ave Traver II Suit State Hance City (Position and Title)  (Institution)
	This Defendant is sued in his/her: windividual capacity official capacity (check one or both)
	Explain how this Defendant was acting under color of law:
Э.	Name of fourth Defendant:at
	Explain how this Defendant was acting under color of law:
If	you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.)
	B. PREVIOUS LAWSUITS
1.	Have you filed any other lawsuits while you were a prisoner?  ☐ Yes ☐ No
2.	If your answer is "yes," how many lawsuits have you filed? Describe the previous lawsuits in the spaces provided below.
3.	First prior lawsuit:  a. Parties to previous lawsuit: Ferningien carety Sqil and Thomas Jersen  Plaintiff: Thomas Jersen
	Mr. Murche LE Medonald - Dan holloway, love Good, Myn Bauning

	b.	c. Court: (If federal court, identify the district; if state court, identify the county.)				
	c	Case or docket number:				
	d.					
	٠.	Statuto Laboration of the Control of				
	e.	Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?				
	f.	Approximate date lawsuit was filed: TULY & TONS				
	g.	Approximate date of disposition: September to 2018				
4.	Sec	cond prior lawsuit:				
	a.	Parties to previous lawsuit:				
		Plaintiff:				
		Defendants:				
	b.	Court: (If federal court, identify the district; if state court, identify the county.)				
	c.	Case or docket number:				
	d.	Claims raised:				
		D' '' (D 1 W 1 1' ' 10 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	e.	Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?				
	f.	Approximate date lawsuit was filed:				
	g.	Approximate date fawsuit was fied.  Approximate date of disposition:				
	5.	Approximate date of disposition.				
5.	Th	ird prior lawsuit:				
		Parties to previous lawsuit:				
		Plaintiff:				
		Defendants:				
	b.	Court: (If federal court, identify the district; if state court, identify the county.)				
	c.	Case or docket number:				
	d.	Claims raised:				
	e.	Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?				
	f.	Approximate date lawsuit was filed:				
	g.	Approximate date of disposition:				
(If	you 1	filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.)				

## C. CAUSE OF ACTION

COUNT I

1. +h	The following constitutional or other federal right has been violated by the Defendant(s):  Notoling of Money in my lock Box account in Wes Moines TH	
2.	Count I involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)  Disciplinary proceedings Retaliation Exercise of religion Property  Threat to safety  Cother:	
3.	what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).  Before I had left Federal Bureau of Prisons. Us. Medical	
	Center For Federal Prisoners. I had givin a form to my Counselor Williams to have my money taken but and sent to my Father. This was May 10 200 a. I have tried many times to get my money sent to rune or my Father. I have never recieve any reply or word from them yet	
4.	Injury: (State how you have been injured by the actions or inactions of the Defendant(s)).  I have had mental anaxish 95 in 9 2244 Case	
	in mental abuse	
5.	Administrative Remedies:  a. Are there any administrative remedies (grievance procedures or administrative appeals available at your institution?  b. Did you submit a request for administrative relief on Count I?  C. Did you appeal your request for relief on Count I to the highest level?  C. Did you did not submit or appeal a request for administrative relief to the highest level, brieflex to lack of fine procedure.	

## D. REQUEST FOR RELIEF

State briefly what you want the Court to do to	ryou. Locat to motion for request
	ats, threland a implioned
mental orner Ush of 1.000	9 dollars live to mente
breakdown	
	<u> </u>
I declare under penalty of perjury that the foregoin	ng is true and correct.
Executed on 7-20-12	Thomas lansen
DATE	SIGNATURE OF PLAINTIFF
Name and title as paraleced level assistant as	
(Name and title or paralegal, legal assistant, or other person who helped prepare this complaint)	
outer person who herped propure this complainty	
(Signature of attorney, if any)	
(Attorney's address & telephone number)	

## **ADDITIONAL PAGES**

All questions must be answered concisely in the proper space on the form. If needed, you may attach additional pages. The form, however, must be completely filled in to the extent applicable.